

CLAIMS ONLY				Application Number		Filing Date	
				10731633			
				Applicant(s)			
* May be used for additional claims or amendments							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
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48							
49							
50							
Total Indep							
Total Depend							
Total Claims			15				
			2				
			17				